

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------------------------|--------|----------|
| FEE DETERMINATION | Y | | 5/17/01 |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | AB | 535 | 11-14-01 |
| RESPONSE FORMALITY REVIEW | BEST AVAILABLE COPY | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 :- Restricted O Objected

| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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7/1/14